

**FEC  
FORM 3****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type  
over the lines.

12FE4M5

KATCHO FOR CONGRESS

ADDRESS (number and street)

2150 RIVER PLAZA DR. #150

Check if different  
than previously  
reported. (ACC)

SACRAMENTO

CA

95833

2. FEC IDENTIFICATION NUMBER ▼

C

C00575886

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

CA

24

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M /

D D /

Y Y Y Y

in the  
State of(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the  
State of

5. Covering Period

M M /

05

D D /

19

Y Y Y Y /

2016

through

M M /

06

D D /

30

Y Y Y Y /

2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer DAVID BAUER

Signature of Treasurer

DAVID BAUER

[Electronically Filed]

Date

M M /

08

D D /

12

Y Y Y Y /

2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3**  
(Revised 02/2003)

# SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

KATCHO FOR CONGRESS

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	9		2	0	1	6

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	6

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	70331.46	828127.32
(b) Total Contribution Refunds (from Line 20(d)) .....	37155.15	40105.15
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	33176.31	788022.17
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	210067.50	822331.53
(b) Total Offsets to Operating Expenditures (from Line 14).....	13704.76	14111.35
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	196362.74	808220.18
8. Cash on Hand at Close of Reporting Period (from Line 27).....	9791.99	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	30000.00	

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

PAGE 3 / 89

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

**KATCHO FOR CONGRESS**

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	9		2	0	1	6

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	6

**I. RECEIPTS**
**COLUMN A**  
Total This Period

**COLUMN B**  
Election Cycle-to-Date
**11. CONTRIBUTIONS (other than loans) FROM:****(a) Individuals/Persons Other Than Political Committees****(i) Itemized (use Schedule A).....**

48621.45

711993.79

**(ii) Unitemized.....**

6710.01

72514.53

**(iii) TOTAL of contributions from individuals ▶**

55331.46

784508.32

**(b) Political Party Committees.....**

0.00

0.00

**(c) Other Political Committees (such as PACs).....**

15000.00

43619.00

**(d) The Candidate.....**

0.00

0.00

**(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..**

70331.46

828127.32

**12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....**

0.00

0.00

**13. LOANS:****(a) Made or Guaranteed by the Candidate.....**

11000.00

41000.00

**(b) All Other Loans.....**

0.00

0.00

**(c) TOTAL LOANS (add Lines 13(a) and (b)).....**

11000.00

41000.00

**14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....**

13704.76

14111.35

**15. OTHER RECEIPTS (Dividends, Interest, etc.) .....**

0.00

0.00

**16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶**

95036.22

883238.67

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 89

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	210067.50	822331.53
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	11000.00	11000.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	11000.00	11000.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	37155.15	40105.15
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	37155.15	40105.15
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	258222.65	873436.68

## **III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	172978.42
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	95036.22
25. SUBTOTAL (add Line 23 and Line 24).....	268014.64
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	258222.65
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	9791.99

: 97 `A=G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB  
.

Form/Schedule: F3A  
Transaction ID :

Additional in-kind contribution

Form/Schedule:  
Transaction ID:

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 6 OF 89

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

KATCHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

DANIEL CASHIER

A.

Mailing Address 48 WHITECAP ST.

City

PISMO BEACH

State

CA

Zip Code

93449

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF

Occupation

CONSULTANT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		19		2016

Transaction ID : INCA2558

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

David Fawcett

B.

Mailing Address 4549 Wavertree St.

City

San Luis Obsipo

State

CA

Zip Code

93401

FEC ID number of contributing  
federal political committee.

C

Name of Employer

retired teacher

Occupation

retired teacher

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		19		2016

Transaction ID : INCA2439

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Helen Free

C.

Mailing Address 408 nogal

City

Lompoc

State

CA

Zip Code

93436

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self

Occupation

Property manager

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

525.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		19		2016

Transaction ID : INCA2559

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

400.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 7 OF 89

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

KATCHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

NORA HOVSEPIAN

A.

Mailing Address 16133 VENTURA BLVD. #910

City

ENCINO

State

CA

Zip Code

91436

FEC ID number of contributing  
federal political committee.

C

Name of Employer

LAW OFFICES OF NORA HOVSEPIAN

Occupation

ATTORNEY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		19		2016

Transaction ID : INCA2569

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Gertrude Jarratt

B.

Mailing Address 555 Windermere Lane

City

Arroyo Grande

State

CA

Zip Code

93420

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1050.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		19		2016

Transaction ID : INCA2549

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

George Kardashian

C.

Mailing Address P.O. Box 1911

City

Paso Robles

State

CA

Zip Code

93447

FEC ID number of contributing  
federal political committee.

C

Name of Employer

San Miguel Garbage Co.

Occupation

self employed

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		19		2016

Transaction ID : INCA2548

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

800.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**KATCHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Martin LaGue**

Mailing Address 550 via Burna ventura

City

Arroyo grande

State

CA

Zip Code

93420

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Positive Directions

Occupation

CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1150.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		19		2016

Transaction ID : INCA2425

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**VICTOR LUND**

Mailing Address 291 FALCON CREST DR.

City

ARROYO GRANDE

State

CA

Zip Code

93420

FEC ID number of contributing  
federal political committee.

C

Name of Employer

WAVE GROUP

Occupation

EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		19		2016

Transaction ID : INCA2440

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**EMILY MYHRE**

Mailing Address 265 N. 16TH ST. #A

City

GROVER BEACH

State

CA

Zip Code

93433

FEC ID number of contributing  
federal political committee.

C

Name of Employer

N/A

Occupation

NOT EMPLOYED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		19		2016

Transaction ID : INCA2555

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1200.00



**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**KATCHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**CHARLES PLOUGH III****A.**

Mailing Address P. O. BOX 5731

City

SANTA BARBARA

State

CA

Zip Code

93150

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF

Occupation

CONSULTANT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		19		2016

**Transaction ID : INCA2560**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**William Reed****B.**

Mailing Address 305 Walden Ct.

City

Santa Maria

State

CA

Zip Code

93454

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Consultant

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

415.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		19		2016

**Transaction ID : INCA2562**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**Lynn Walter****C.**

Mailing Address 1872 Kingfisher Lane

City

Avila Beach

State

CA

Zip Code

93424

FEC ID number of contributing  
federal political committee.

C

Name of Employer

self

Occupation

consultant

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

215.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		19		2016

**Transaction ID : INCA2437**

Amount of Each Receipt this Period

50.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

250.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 10 OF 89

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

KATCHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Anthony 'Tony' Wells

Mailing Address PO Box 474

City

Grover Beach

State

CA

Zip Code

93458

FEC ID number of contributing  
federal political committee.

C

Name of Employer

The HMW Group, Ltd

Occupation

Real Estate Development, home building

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		19		2016

Transaction ID : INCA2554

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. LINDA AUSTIN

Mailing Address 636 AIR PARK DR.

City

Oceano

State

CA

Zip Code

93475

FEC ID number of contributing  
federal political committee.

C

Name of Employer

GUITON REALTY

Occupation

REALTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		20		2016

Transaction ID : INCA2444

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Glenda Guiton

Mailing Address 1330 Lakeside

City

Oceano

State

CA

Zip Code

93445

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Guiton Realty

Occupation

Realtor

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		20		2016

Transaction ID : INCA2446

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

200.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 11 OF 89

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**KATCHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**ALAIN KUYUMJIAN****A.**

Mailing Address 144 LEE RD.

City

SCARSDALE

State

NY

Zip Code

10583

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF

Occupation

CONSULTANT

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		20		2016

**Transaction ID : INCA2491**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**ARMAN KUYUMJIAN****B.**

Mailing Address 41 W. 82ND ST. #8C

City

NEW YORK

State

NY

Zip Code

10024

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HAYNES &amp; BOONE

Occupation

ATTORNEY

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		20		2016

**Transaction ID : INCA2487**

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**RYAN OGANESIAN****C.**

Mailing Address 5037 VISTA MONTANA

City

YORBA LINDA

State

CA

Zip Code

92886

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MEDICAL WASTE MANAGEMENT SVC.

Occupation

OWNER

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		20		2016

**Transaction ID : INCA2441**

Amount of Each Receipt this Period

2000.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

2750.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 12 OF 89

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**KATCHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**DOUG SHAW**

Mailing Address 1686 LA VENIDA

City

SAN LUIS OBISPO

State

CA

Zip Code

93401

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SANTUARIO

Occupation

SALES

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

950.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		20		2016

Transaction ID : NONA2727

Amount of Each Receipt this Period

700.00

☐ Memo Item  
 AUCTION ITEMS

Full Name (Last, First, Middle Initial)

**ERIC BARNES**

Mailing Address 204 20TH ST.

City

HUNTINGTON BEACH

State

CA

Zip Code

92648

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MEDICAL WASTE DISPOSAL

Occupation

SALES

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		21		2016

Transaction ID : INCA2461

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**JOSEPH E SESTO**

Mailing Address PO BOX 777

City

NIPOMO

State

CA

Zip Code

93444

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SESTO INSURANCE SERVICES

Occupation

INSURANCE BROKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		22		2016

Transaction ID : INCA2454

Amount of Each Receipt this Period

100.00

☐ Memo Item
**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

1800.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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 (check only one)  
☒ 11a 12 ☐ 11b 13a ☐ 11c 13b ☐ 11d 14 ☐ 15

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NAME OF COMMITTEE (In Full)  
**KATCHO FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>Jonathan istrin</b>		Date of Receipt M M / D D / Y Y Y Y <b>05 / 23 / 2016</b>
Mailing Address <b>5537 Bluebell Ave</b>		<b>Transaction ID : INCA2504</b>
City <b>Valley Village</b>	State <b>CA</b>	Zip Code <b>91607</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1000.00</b>
Name of Employer <b>Libertana Home Health of Sherman Oaks</b>	Occupation <b>HEalth Care Admionistrator</b>	<input type="checkbox"/> Memo Item
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>1000.00</b>	

Full Name (Last, First, Middle Initial) <b>TANYA BAGHDASSARIAN</b>		Date of Receipt M M / D D / Y Y Y Y <b>05 / 24 / 2016</b>
Mailing Address <b>62 E. RIVER RD.</b>		<b>Transaction ID : INCA2620</b>
City <b>RUMSON</b>	State <b>NJ</b>	Zip Code <b>07760</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>500.00</b>
Name of Employer <b>N/A</b>	Occupation <b>NOT EMPLOYED</b>	<input type="checkbox"/> Memo Item
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>500.00</b>	

Full Name (Last, First, Middle Initial) <b>ANTHONY DETWEILER</b>		Date of Receipt M M / D D / Y Y Y Y <b>05 / 24 / 2016</b>
Mailing Address <b>2780 COAST VIEW DR.</b>		<b>Transaction ID : INCA2603</b>
City <b>ARROYO GRANDE</b>	State <b>CA</b>	Zip Code <b>93420</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>500.00</b>
Name of Employer <b>ALD MANAGEMENT</b>	Occupation <b>PRES.</b>	<input type="checkbox"/> Memo Item
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>500.00</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>2000.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

KATCHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

KATHY GOMER

A.

Mailing Address 2951 WALLACE DR.

City

PASO ROBLES

State

CA

Zip Code

93446

FEC ID number of contributing  
federal political committee.

C

Name of Employer

N/A

Occupation

NOT EMPLOYED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		24		2016

Transaction ID : INCA2591

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

SONA-LISE HARATUNIAN

B.

Mailing Address 45 EAST 25TH ST. #31-B

City

NEW YORK

State

NY

Zip Code

10010

FEC ID number of contributing  
federal political committee.

C

Name of Employer

UBS

Occupation

TALENT MANAGEMENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		24		2016

Transaction ID : INCA2617

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

ARMEN HOVNANIAN

C.

Mailing Address 1266 OCEAN AVE. #1

City

SEA BRIGHT

State

NJ

Zip Code

07760

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HOVNANIAN PROPERTY

Occupation

DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		24		2016

Transaction ID : INCA2579

Amount of Each Receipt this Period

1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2250.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**KATCHO FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**LEELA HOVNANIAN**

Mailing Address 65 OLD FARM RD.

City WOODSTOCK	State NY	Zip Code 12498
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A	Occupation NOT EMPLOYED
-------------------------	----------------------------

Receipt For: 2016  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt

M M / D D / Y Y Y Y
05 / 24 / 2016

Transaction ID : INCA2578

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**DIDO KRIKORIAN**

Mailing Address 15 HILL RD.

City ATLANTIC HIGHLANDS	State NJ	Zip Code 07716
----------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A	Occupation NOT EMPLOYED
-------------------------	----------------------------

Receipt For: 2016  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt

M M / D D / Y Y Y Y
05 / 24 / 2016

Transaction ID : INCA2618

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Ron Ritter**

Mailing Address 258 Rodeo Dr

City Arroyo Grande	State CA	Zip Code 93420
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2016  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt

M M / D D / Y Y Y Y
05 / 24 / 2016

Transaction ID : INCA2600

Amount of Each Receipt this Period

250.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

1750.00
---------

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

KATCHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

WILLIAM SENNA

A.

Mailing Address 1404 E. GRAND AVE.

City

ARROYO GRANDE

State

CA

Zip Code

93420

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SENNA'S INSURANCE SVC.

Occupation

INSURANCE BROKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		24		2016

Transaction ID : INCA2599

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

ANNIE SETRAKIAN

B.

Mailing Address 31 RICKLAND RD.

City

OLD TAPPAN

State

NJ

Zip Code

07675

FEC ID number of contributing  
federal political committee.

C

Name of Employer

N/A

Occupation

NOT EMPLOYED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		24		2016

Transaction ID : INCA2621

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

GREGORY SIMONIAN

C.

Mailing Address 300 SKYLARK CT.

City

PARAMUS

State

NJ

Zip Code

07652

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF

Occupation

PHYSICIAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		24		2016

Transaction ID : INCA2576

Amount of Each Receipt this Period

2500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3000.00



**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 17 OF 89

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**KATCHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**IRENE VOSBIKIAN****A.**

Mailing Address 408 POND VIEW DR.

City

MOORESTOWN

State

NJ

Zip Code

08057

FEC ID number of contributing  
federal political committee.

C

Name of Employer

N/A

Occupation

NOT EMPLOYED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		24		2016

**Transaction ID : INCA2541**

Amount of Each Receipt this Period

1700.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**PETER VOSBIKIAN****B.**

Mailing Address 408 POND VIEW DR.

City

MOORESTOWN

State

NJ

Zip Code

08057

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF

Occupation

INVESTOR

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		24		2016

**Transaction ID : INCA2606**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**PETER VOSBIKIAN****C.**

Mailing Address 408 POND VIEW DR.

City

MOORESTOWN

State

NJ

Zip Code

08057

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF

Occupation

INVESTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		24		2016

**Transaction ID : INCA2539**

Amount of Each Receipt this Period

2700.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

5400.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

KATCHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

David Fawcett

Mailing Address 4549 Wavertree St.

City

San Luis Obsipo

State

CA

Zip Code

93401

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
retired teacherOccupation  
retired teacher

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		25		2016

Transaction ID : INCA2586

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

douglas fell

Mailing Address 222 e carrillo street

City

santa barbara

State

CA

Zip Code

93101

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
fell Marking et alOccupation  
fell Marking et al

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

648.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		25		2016

Transaction ID : INCA2584

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Steve Boneso

Mailing Address 1910 Carrisa Highway

City

Santa Margarita

State

CA

Zip Code

93453

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
OwnerOccupation  
Farming / Construction

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		26		2016

Transaction ID : INCA2588

Amount of Each Receipt this Period

1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1350.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

KATCHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

MELODY HUTCHINS

A.

Mailing Address 77425 INDIAN VALLEY RD.

City

SAN MIGUEL

State

CA

Zip Code

93451

FEC ID number of contributing  
federal political committee.

C

Name of Employer

N/A

Occupation

NOT EMPLOYED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		26		2016

Transaction ID : INCA2628

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

J JOHNSON

B.

Mailing Address 1208 HUASNA RD.

City

ARROYO GRANDE

State

CA

Zip Code

93420

FEC ID number of contributing  
federal political committee.

C

Name of Employer

LAW OFFICE OF J JOHNSON

Occupation

ATTORNEY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1270.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		26		2016

Transaction ID : INCA2626

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Charles &amp; Lisa Katherman

C.

Mailing Address 206 Indio Drive

City

Shell Beach

State

CA

Zip Code

93449

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self

Occupation

Geologist

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		26		2016

Transaction ID : INCA2590

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1250.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

KATCHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

CAROLYN MINER

A.

Mailing Address 1727 LA CUMBRE LANE

City

Nipomo

State

CA

Zip Code

93444

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NOT EMPLOYED

Occupation

NOT EMPLOYED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		26		2016

Transaction ID : INCA2624

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MARK SHEVITZ

B.

Mailing Address 4000 CUERVO AVE.

City

SANTA BARBARA

State

CA

Zip Code

93110

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF

Occupation

INVESTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		26		2016

Transaction ID : INCA2627

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Steve Lohr

C.

Mailing Address P. O. Box 17435

City

Stanford

State

CA

Zip Code

94309

FEC ID number of contributing  
federal political committee.

C

Name of Employer

J. Lohr Vineyards &amp; Wines

Occupation

Vintner

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		27		2016

Transaction ID : INCA2596

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1100.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**KATCHO FOR CONGRESS**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>Roberta 'Bobbi' McGinnis</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 27 / 2016	
Mailing Address 4575 Camino Molinero		<b>Transaction ID : INCA2598</b>	
City Santa Barbara	State CA	Zip Code 93110	Amount of Each Receipt this Period _____ 25.00
FEC ID number of contributing federal political committee. C _____		<input type="checkbox"/> Memo Item	
Name of Employer Century 21 Butler Realty, Inc.	Occupation real estate sales & development		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 390.00		
<b>B.</b> Full Name (Last, First, Middle Initial) <b>Mark Burns</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 30 / 2016	
Mailing Address P.O. Box 3195		<b>Transaction ID : INCA2610</b>	
City Pismo Beach	State CA	Zip Code 93448	Amount of Each Receipt this Period _____ 250.00
FEC ID number of contributing federal political committee. C _____		<input type="checkbox"/> Memo Item	
Name of Employer Real Estate	Occupation Self		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 250.00		
<b>C.</b> Full Name (Last, First, Middle Initial) <b>WISE BROOKS</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 31 / 2016	
Mailing Address 545 SANDY OAKS RD.		<b>Transaction ID : INCA2677</b>	
City NIPOMO	State CA	Zip Code 93444	Amount of Each Receipt this Period _____ 125.00
FEC ID number of contributing federal political committee. C _____		<input type="checkbox"/> Memo Item	
Name of Employer HERITAGE OAKS BANK	Occupation BANKING		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 375.00		
<b>SUBTOTAL</b> of Receipts This Page (optional) .....		_____ 400.00	
<b>TOTAL</b> This Period (last page this line number only) .....		_____	

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

KATCHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

JAC CRAWFORD

A.

Mailing Address 655 MISSION SPRINGS RD.

City

ARROYO GRANDE

State

CA

Zip Code

93420

FEC ID number of contributing  
federal political committee.

C

Name of Employer

N/A

Occupation

NOT EMPLOYED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2016

Transaction ID : INCA2678

Amount of Each Receipt this Period

125.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

ADNAN EL-HELOU

B.

Mailing Address 224 CHRISTINE WAY

City

PISMO BEACH

State

CA

Zip Code

93449

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF

Occupation

JEWELER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2016

Transaction ID : INCA2634

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

BERNICE FLOOD

C.

Mailing Address 1156 ROYAL OAK PL.

City

Arroyo Grande

State

CA

Zip Code

93420

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NOT EMPLOYED

Occupation

NOT EMPLOYED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

725.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2016

Transaction ID : INCA2674

Amount of Each Receipt this Period

125.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1250.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

KATCHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

KIRAKOSIAN &amp; ASSOCIATES

A.

Mailing Address 108 N BRAND BLVD., STE. 201

City

Glendale

State

CA

Zip Code

91203

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NOT INCORPORATED

Occupation

PARTNERSHIP

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2016

Transaction ID : INCA2630

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

SILVA KIRAKOSIAN

B.

Mailing Address 108 N. BRAND BLVD. #201

City

GLENDALE

State

CA

Zip Code

91203

FEC ID number of contributing  
federal political committee.

C

Name of Employer

KIRAKOSIAN &amp; ASSOC.

Occupation

PARTNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2016

Transaction ID : IDTA48

Amount of Each Receipt this Period

1000.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

TILDON MCGILL

C.

Mailing Address 190 LAKEVIEW RD.

City

SANTA MARIA

State

CA

Zip Code

93455

FEC ID number of contributing  
federal political committee.

C

Name of Employer

N/A

Occupation

NOT EMPLOYED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2016

Transaction ID : INCA2667

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1500.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**KATCHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Michael McGinnis**

Mailing Address 4575 Camino Molinero

City

Santa Barbara

State

CA

Zip Code

93110

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Morgan Stanley

Occupation

CFP Stock Broker

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2016

Transaction ID : NONA2716

Amount of Each Receipt this Period

400.00

☐ Memo Item  
 SUPPLIES

Full Name (Last, First, Middle Initial)

**ELIAS NIMEH**

Mailing Address 879 MIRADA DR.

City

SAN LUIS OBISPO

State

CA

Zip Code

93405

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SENIOR NUTRITION PROGRAM

Occupation

DIRECTOR

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2016

Transaction ID : INCA2684

Amount of Each Receipt this Period

125.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**Ray Ondrejch**

Mailing Address 2031 Vista Oaks Way

City

Paso Robles

State

CA

Zip Code

93446

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Vina Robles

Occupation

Winery

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

310.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2016

Transaction ID : INCA2681

Amount of Each Receipt this Period

250.00

☐ Memo Item
**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

775.00



# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 25 OF 89

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

KATCHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

LINDA OSTAPOWICZ

A.

Mailing Address 309 E. CHERRY AVE.

City

ARROYO GRANDE

State

CA

Zip Code

93420

FEC ID number of contributing  
federal political committee.

C

Name of Employer

OSTY INSURANCE AGENCY

Occupation

INSURANCE AGENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1150.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2016

Transaction ID : INCA2680

Amount of Each Receipt this Period

750.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

ERA POLLY

B.

Mailing Address 200 E. CLARK AVE.

City

ORCUTT

State

CA

Zip Code

93455

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF

Occupation

REAL ESTATE BROKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2016

Transaction ID : INCA2672

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

JOAN PRUETT

C.

Mailing Address 2878 HUASNA RD.

City

Arroyo Grande

State

CA

Zip Code

93420

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NOT EMPLOYED

Occupation

NOT EMPLOYED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2016

Transaction ID : INCA2682

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1300.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

KATCHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

DOUG SHAW

Mailing Address 1686 LA VENIDA

City

SAN LUIS OBISPO

State

CA

Zip Code

93401

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SANTUARIO

Occupation

SALES

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

950.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		31		2016

Transaction ID : INCA2670

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

PAMELA STORTON

Mailing Address P. O. BOX 29

City

PISMO BEACH

State

CA

Zip Code

93448

FEC ID number of contributing  
federal political committee.

C

Name of Employer

STORTON PROPERTIES

Occupation

REAL ESTATE BROKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		31		2016

Transaction ID : INCA2690

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

ROBERT ANDREWS

Mailing Address 1369 TROUVILLE AVE.

City

GROVER BEACH

State

CA

Zip Code

93433

FEC ID number of contributing  
federal political committee.

C

Name of Employer

N/A

Occupation

NOT EMPLOYED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		01		2016

Transaction ID : INCA2710

Amount of Each Receipt this Period

300.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

800.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**KATCHO FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**JEFFREY HERTEN**

Mailing Address 2695 SEE CANYON RD.

City SAN LUIS OBISPO	State CA	Zip Code 93405
-------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF	Occupation PHYSICIAN
--------------------------	-------------------------

Receipt For: 2016  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		01		2016

Transaction ID : INCA2712

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**GLORIA MANDELLA**

Mailing Address 801 NORMA DR.

City Pismo Beach	State CA	Zip Code 93449
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NOT EMPLOYED	Occupation NOT EMPLOYED
----------------------------------	----------------------------

Receipt For: 2016  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		01		2016

Transaction ID : INCA2709

Amount of Each Receipt this Period

100.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**TOM WOODWARD**

Mailing Address 93 EL VIENTO

City PISMO BEACH	State CA	Zip Code 93448
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A	Occupation NOT EMPLOYED
-------------------------	----------------------------

Receipt For: 2016  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		01		2016

Transaction ID : INCA2708

Amount of Each Receipt this Period

500.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

850.00
--------

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 28 OF 89

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

KATCHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

LAURIE KING-ROSSI

A.

Mailing Address 7500 PISMO ST.

City

SAN LUIS OBISPO

State

CA

Zip Code

93401

FEC ID number of contributing  
federal political committee.

C

Name of Employer

N/A

Occupation

NOT EMPLOYED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		02		2016

Transaction ID : INCA2640

Amount of Each Receipt this Period

1350.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

ROBIN ROSSI

B.

Mailing Address 750 PISMO ST.

City

SAN LUIS OBISPO

State

CA

Zip Code

93401

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF

Occupation

ARCHITECT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		02		2016

Transaction ID : INCA2639

Amount of Each Receipt this Period

1350.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Ty Safreno

C.

Mailing Address 143 Suburban Road

City

San Luis Obispo

State

CA

Zip Code

93401

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Trust Automation Inc

Occupation

Owner

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		02		2016

Transaction ID : INCA2638

Amount of Each Receipt this Period

1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3700.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**KATCHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Gary Vandeman**

Mailing Address 250 Salisbury Ave.

City

Goleta

State

CA

Zip Code

93117

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		02		2016

Transaction ID : INCA2652

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Nyri Achadjian**

Mailing Address 203 Patricia Court

City

San Luis Obispo

State

CA

Zip Code

93405

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Discotech, Inc.

Occupation

Business Development

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1058.97

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		03		2016

Transaction ID : NONA2842

Amount of Each Receipt this Period

971.45

☐ Memo Item

ONLINE ADVERTISING

Full Name (Last, First, Middle Initial)

**C. KENNETH DEWAR**

Mailing Address 1151 CORBETT CANYON RD.

City

ARROYO GRANDE

State

CA

Zip Code

93420

FEC ID number of contributing  
federal political committee.

C

Name of Employer

JB DEWAR INC.

Occupation

OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1200.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		03		2016

Transaction ID : INCA2666

Amount of Each Receipt this Period

100.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

1321.45

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 30 OF 89  
(check only one)  
☒ 11a 12 ☐ 11b 13a ☐ 11c 13b ☐ 11d 14 ☐ 15

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NAME OF COMMITTEE (In Full)  
**KATCHO FOR CONGRESS**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>Roger Dunham</b>			Date of Receipt M M / D D / Y Y Y Y 06 / 03 / 2016		
Mailing Address 4662 Via Roblada			<b>Transaction ID : INCA2660</b>		
City	State	Zip Code	Amount of Each Receipt this Period _____ 50.00		
Santa Barbara	CA	93110	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee.		C _____	Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Name of Employer retired		Occupation retired	Election Cycle-to-Date _____ 600.00		
<b>B.</b> Full Name (Last, First, Middle Initial) <b>Nancy Flamm</b>			Date of Receipt M M / D D / Y Y Y Y 06 / 03 / 2016		
Mailing Address 575 North Green Valley Rd			<b>Transaction ID : INCA2656</b>		
City	State	Zip Code	Amount of Each Receipt this Period _____ 65.00		
Cambria	CA	93428	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee.		C _____	Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Name of Employer Retired		Occupation Retired	Election Cycle-to-Date _____ 2565.00		
<b>C.</b> Full Name (Last, First, Middle Initial) <b>STEVEN HANDELMAN</b>			Date of Receipt M M / D D / Y Y Y Y 06 / 03 / 2016		
Mailing Address 7705 KESTREL LN.			<b>Transaction ID : INCA2697</b>		
City	State	Zip Code	Amount of Each Receipt this Period _____ 100.00		
GOLETA	CA	93117	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee.		C _____	Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Name of Employer STEVEN HANDELMAN STUDIOS		Occupation CONTRACTOR	Election Cycle-to-Date _____ 1600.00		
<b>SUBTOTAL</b> of Receipts This Page (optional).....			_____ 215.00		
<b>TOTAL</b> This Period (last page this line number only).....			_____		

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**KATCHO FOR CONGRESS**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>Ron Holland</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 03 / 2016	
Mailing Address 1220 Marsh St.		<b>Transaction ID : INCA2700</b>	
City SAN LUIS OBISPO	State CA	Zip Code 93401	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item	
Name of Employer Ron Holland Rentals	Occupation Owner		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		
<b>B.</b> Full Name (Last, First, Middle Initial) <b>John Hovannisian</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 03 / 2016	
Mailing Address 5730 W. Elowin Drive		<b>Transaction ID : INCA2662</b>	
City Visalia	State CA	Zip Code 93291	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item	
Name of Employer Winemaker	Occupation self		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		
<b>C.</b> Full Name (Last, First, Middle Initial) <b>William Reed</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 03 / 2016	
Mailing Address 305 Walden Ct.		<b>Transaction ID : INCA2695</b>	
City Santa Maria	State CA	Zip Code 93454	Amount of Each Receipt this Period 65.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item	
Name of Employer Retired	Occupation Consultant		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 415.00		
<b>SUBTOTAL</b> of Receipts This Page (optional).....		1315.00	
<b>TOTAL</b> This Period (last page this line number only).....			

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**KATCHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**EDWARD ATTALA****A.**

Mailing Address 615 EVANS RD.

City

SAN LUIS OBISPO

State

CA

Zip Code

93401

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF

Occupation

ATTORNEY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		04		2016

**Transaction ID : INCA2725**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**David Fawcett****B.**

Mailing Address 4549 Wavertree St.

City

San Luis Obsipo

State

CA

Zip Code

93401

FEC ID number of contributing  
federal political committee.

C

Name of Employer

retired teacher

Occupation

retired teacher

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

550.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		04		2016

**Transaction ID : INCA2699**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**TOM O'MALLEY****C.**

Mailing Address P. O. BOX 808

City

ATASCADERO

State

CA

Zip Code

93423

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PORTOLA INN

Occupation

PROPRIETOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1550.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		04		2016

**Transaction ID : NONA2707**

Amount of Each Receipt this Period

1300.00

☐ Memo Item

FUNDRAISING EVENT

**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

1650.00



# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

KATCHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

Lynn Walter

Mailing Address 1872 Kingfisher Lane

City

Avila Beach

State

CA

Zip Code

93424

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
selfOccupation  
consultant

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

215.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		04		2016

Transaction ID : INCA2702

Amount of Each Receipt this Period

65.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Lawrence N. Benedict

Mailing Address 358 Falcon Crest Dr

City

Arroyo Grande

State

CA

Zip Code

93420

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Department of StateOccupation  
Foreign Service Officer (retired)

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		05		2016

Transaction ID : INCA2704

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Debra Isbell

Mailing Address 3144 Montano Dr.

City

Santa Maria

State

CA

Zip Code

93455

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
First Team Real EstateOccupation  
Real estate

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

415.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		05		2016

Transaction ID : INCA2706

Amount of Each Receipt this Period

65.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

380.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

KATCHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Alfred Amaral

Mailing Address 1597 Royal Way

City

San Luis Obispo

State

CA

Zip Code

93405

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		06		2016

Transaction ID : INCA2720

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Juliet Bischoff

Mailing Address 263 Aspen Way

City

Santa Barbara

State

CA

Zip Code

93111

FEC ID number of contributing  
federal political committee.

C

Name of Employer

self employed

Occupation

consultant

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

215.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		06		2016

Transaction ID : INCA2739

Amount of Each Receipt this Period

65.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. JORDAN CUNNINGHAM

Mailing Address 1494 CONDOR LN.

City

TEMPLETON

State

CA

Zip Code

93465

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF

Occupation

ATTORNEY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		06		2016

Transaction ID : INCA2738

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

665.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**KATCHO FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>douglas fell</b>		Date of Receipt M M / D D / Y Y Y Y <b>06 / 06 / 2016</b>
Mailing Address <b>222 e carrillo street</b>		<b>Transaction ID : INCA2718</b>
City <b>santa barbara</b>	State <b>CA</b>	Zip Code <b>93101</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>50.00</b>
Name of Employer <b>fell Marking et al</b>	Occupation <b>fell Marking et al</b>	<input type="checkbox"/> Memo Item
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>648.00</b>	

Full Name (Last, First, Middle Initial) <b>HAGOB MELKONIAN</b>		Date of Receipt M M / D D / Y Y Y Y <b>06 / 06 / 2016</b>
Mailing Address <b>4772 Baxter Street</b>		<b>Transaction ID : INCA2744</b>
City <b>SANTA BARBARA</b>	State <b>CA</b>	Zip Code <b>93110</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>300.00</b>
Name of Employer <b>N/A</b>	Occupation <b>NOT EMPLOYED</b>	<input type="checkbox"/> Memo Item
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>300.00</b>	

Full Name (Last, First, Middle Initial) <b>TOM O'MALLEY</b>		Date of Receipt M M / D D / Y Y Y Y <b>06 / 06 / 2016</b>
Mailing Address <b>P. O. BOX 808</b>		<b>Transaction ID : INCA2735</b>
City <b>ATASCADERO</b>	State <b>CA</b>	Zip Code <b>93423</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>250.00</b>
Name of Employer <b>PORTOLA INN</b>	Occupation <b>PROPRIETOR</b>	<input type="checkbox"/> Memo Item
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>1550.00</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>600.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
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(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**KATCHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**FRANK ROOT**

Mailing Address 4717 PREFUMO CYN. RD.

City

San Luis Obispo

State

CA

Zip Code

93405

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-FRANK ROOTOccupation  
RANCHER

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		06		2016

Transaction ID : INCA2741

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**Marguerite Wartanian**

Mailing Address 491 Garden Street

City

Arroyo Grande

State

CA

Zip Code

93420

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NoneOccupation  
House wife

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		06		2016

Transaction ID : INCA2745

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**JOSEPH BAILEY**

Mailing Address 2577 TREASURE DR.

City

SANTA BARBARA

State

CA

Zip Code

93105

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/AOccupation  
NOT EMPLOYED

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		07		2016

Transaction ID : INCA2753

Amount of Each Receipt this Period

200.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

1450.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
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☒ 11a 12 ☐ 11b 13a ☐ 11c 13b ☐ 11d 14 ☐ 15

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NAME OF COMMITTEE (In Full)  
**KATCHO FOR CONGRESS**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>MARJORIE BAILEY</b>			Date of Receipt M M / D D / Y Y Y Y 06 / 07 / 2016		
Mailing Address 2577 TREASURER DR.			<b>Transaction ID : INCA2752</b>		
City	State	Zip Code	Amount of Each Receipt this Period _____ 200.00		
SANTA BARBARA	CA	93105	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee.		C _____	Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Name of Employer N/A		Occupation NOT EMPLOYED	Election Cycle-to-Date _____ 550.00		
<b>B.</b> Full Name (Last, First, Middle Initial) <b>JEROME LOHR</b>			Date of Receipt M M / D D / Y Y Y Y 06 / 13 / 2016		
Mailing Address 18755 MONTEWOOD DR.			<b>Transaction ID : INCA2779</b>		
City	State	Zip Code	Amount of Each Receipt this Period _____ 1000.00		
SARATOGA	CA	95070	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee.		C _____	Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Name of Employer J. LOHR WINERY		Occupation WINEGROWER	Election Cycle-to-Date _____ 1000.00		
<b>C.</b> Full Name (Last, First, Middle Initial) <b>Bridget Ready</b>			Date of Receipt M M / D D / Y Y Y Y 06 / 15 / 2016		
Mailing Address 4816 Bridge Creek Road			<b>Transaction ID : INCA2769</b>		
City	State	Zip Code	Amount of Each Receipt this Period _____ 50.00		
San Luis Obispo	CA	93401	<input type="checkbox"/> Memo Item DEBT RETIREMENT		
FEC ID number of contributing federal political committee.		C _____	Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Name of Employer San Luis Coastal		Occupation Teachet	Election Cycle-to-Date _____ 850.00		
<b>SUBTOTAL</b> of Receipts This Page (optional).....			_____ 1250.00		
<b>TOTAL</b> This Period (last page this line number only).....			_____		

: 97 `A=G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @G `CF`+H9A=N5HCB  
.

Form/Schedule: SA11AI

Transaction ID : INCA2779

DEBT RETIREMENT

Form/Schedule:

Transaction ID:

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**KATCHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**TIM MURPHY****A.**

Mailing Address 1560 EWING AVE.

City

Arroyo Grande

State

CA

Zip Code

93420

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MURPHY & ASSOCIATESOccupation  
BUSINESS OWNER

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		23		2016

**Transaction ID : INCA2794**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**CHARLES MUNGER JR.****B.**

Mailing Address 1423 HAMILTON AVE.

City

PALO ALTO

State

CA

Zip Code

94301

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELFOccupation  
PHYSICIST

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		29		2016

**Transaction ID : INCA2817**

Amount of Each Receipt this Period

2700.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

3700.00

48621.45

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB  
.

Form/Schedule: SA11AI

Transaction ID : INCA2794

DEBT RETIREMENT

Form/Schedule: SA11AI

Transaction ID: INCA2817

DEBT RETIREMENT



# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

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☐ 11a ☐ 11b ☒ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**KATCHO FOR CONGRESS**

A. Full Name (Last, First, Middle Initial)  
**REALTORS PAC (R.P.A.C.)**

Mailing Address 430 N. MICHIGAN AVE.

City State Zip Code  
CHICAGO IL 60611

FEC ID number of contributing  
federal political committee.

**C** C00030718

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
05 19 2016

Transaction ID : INCA2435

Amount of Each Receipt this Period

5000.00

☐ Memo Item

B. Full Name (Last, First, Middle Initial)  
**CALIF. CATTLEMAN'S ASSOC. PAC - FEDERAL**

Mailing Address 1221 H ST.

City State Zip Code  
SACRAMENTO CA 95814

FEC ID number of contributing  
federal political committee.

**C** C00518787

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
06 06 2016

Transaction ID : INCA2743

Amount of Each Receipt this Period

5000.00

☐ Memo Item

C. Full Name (Last, First, Middle Initial)  
**NAT'L AUTOMOBILE DEALERS ASSOC. (NADA) PAC**

Mailing Address 412 FIRST ST. SE

City State Zip Code  
WASHINGTON DC 20003

FEC ID number of contributing  
federal political committee.

**C** C00040998

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
06 06 2016

Transaction ID : INCA2713

Amount of Each Receipt this Period

5000.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

15000.00

15000.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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☐ 11a ☐ 11b ☐ 11c ☐ 11d  
12 ☒ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)  
**KATCHO FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**KHATCHIK ACHADJIAN**

Mailing Address **222 GRAND AVE.**

City **ARROYO GRANDE** State **CA** Zip Code **93420**

FEC ID number of contributing federal political committee. **C**

Name of Employer **ST. OF CALIF** Occupation **LEGISLATOR**

Receipt For: 2016  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date  
**41000.00**

Date of Receipt

**06** / **10** / **2016**

Transaction ID : **PAYA2747**

Amount of Each Receipt this Period

**11000.00**

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
☐ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

/ /

Amount of Each Receipt this Period

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
☐ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

/ /

Amount of Each Receipt this Period

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional) .....

**TOTAL** This Period (last page this line number only) .....

**11000.00**

**11000.00**

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:  
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☒ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**KATCHO FOR CONGRESS**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>OCTOPUS AUDIO</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 19 / 2016
Mailing Address P. O. BOX 7885		<b>Transaction ID : INCA2749</b>  Amount of Each Receipt this Period 225.00 <input type="checkbox"/> Memo Item CHECK VOIDED
City CITRUS HEIGHTS	State CA	
Zip Code 95621		
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 225.00	

<b>B.</b> Full Name (Last, First, Middle Initial) <b>DAVID BAUER</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 15 / 2016
Mailing Address 2150 RIVER PLAZA DR. #150		<b>Transaction ID : INCA2773</b>  Amount of Each Receipt this Period 5022.55 <input type="checkbox"/> Memo Item REFUND OF EXCESS PAYMENTS
City Sacramento	State CA	
Zip Code 95833		
FEC ID number of contributing federal political committee. C		
Name of Employer SELF	Occupation ACCOUNTANT	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5023.55	

<b>C.</b> Full Name (Last, First, Middle Initial) <b>CONSERVATIVE VOTER GUIDE</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 15 / 2016
Mailing Address 9321 SILVERBEND LN.		<b>Transaction ID : INCA2770</b>  Amount of Each Receipt this Period 3638.79 <input type="checkbox"/> Memo Item REFUND FOR CANCELLED MAILING
City ELK GROVE	State CA	
Zip Code 95624		
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3638.79	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	8886.34
<b>TOTAL</b> This Period (last page this line number only).....	

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB  
.

Form/Schedule: SA14

Transaction ID : INCA2749

PAYMENT MADE IN ERROR

Form/Schedule:

Transaction ID:

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 45 OF 89

<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**KATCHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**CALIF. TAXPAYER PROTECTION VOTER GUIDE**

Mailing Address 9321 SILVERBEND LN.

City	State	Zip Code
ELK GROVE	CA	95624

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

4818.42

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	20	/	2016

Transaction ID : INCA2778

Amount of Each Receipt this Period

4818.42

☐ Memo Item

REFUND FOR CANCELLED MAILING

Full Name (Last, First, Middle Initial)

**B.**  
Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Receipt this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**  
Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Receipt this Period

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

4818.42

13704.76

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 46 OF 89

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**KATCHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. EFUNDRAISING CONNECTIONS**

Mailing Address 2131 CAPITOL AVE. #306

City	State	Zip Code
Sacramento	CA	95816

Purpose of Disbursement  
MERCHANT FEE

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		19		2016

Amount of Each Disbursement this Period

7.00
------

☐ Memo Item

Transaction ID : EXPB2573

**B. ROBERT MERCADO**

Mailing Address 1215 CACIQUE ST. #D

City	State	Zip Code
SANTA BARBARA	CA	93103

Purpose of Disbursement  
CANVASSING

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		19		2016

Amount of Each Disbursement this Period

196.00
--------

☐ Memo Item

Transaction ID : EXPB2431

**C. MERIDIAN PACIFIC, INC.**

Mailing Address 925 UNIVERSITY AVE.

City	State	Zip Code
SACRAMENTO	CA	95825

Purpose of Disbursement  
TV ADVERTISING

004

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		19		2016

Amount of Each Disbursement this Period

74999.00
----------

☐ Memo Item

Transaction ID : EXPB2433

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

75202.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 47 OF 89

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**KATCHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. EFUNDRAISING CONNECTIONS**

Mailing Address 2131 CAPITOL AVE. #306

City	State	Zip Code
Sacramento	CA	95816

Purpose of Disbursement  
MERCHANT FEE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		20		2016

Amount of Each Disbursement this Period

63.00
-------

☐ Memo Item

Transaction ID : EXPB2574

**B. DOUG SHAW**

Mailing Address 1686 LA VENIDA

City	State	Zip Code
SAN LUIS OBISPO	CA	93401

Purpose of Disbursement  
AUCTION ITEMSCategory/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		20		2016

Amount of Each Disbursement this Period

700.00
--------

☐ Memo Item

Transaction ID : NONB2727

**C. ARAXIE ACHADJIAN**

Mailing Address 525 TRAFFIC AVE. #A

City	State	Zip Code
ARROYO GRANDE	CA	93420

Purpose of Disbursement  
POSTAGE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		23		2016

Amount of Each Disbursement this Period

5.50
------

☐ Memo Item

Transaction ID : EXPB2525

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

768.50

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 48 OF 89

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**KATCHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. U. S. POSTAL SVC.**

Mailing Address 160 STATION WAY

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		23		2016

City	State	Zip Code
ARROYO GRANDE	CA	93420

Amount of Each Disbursement this Period

6.50
------

Purpose of Disbursement  
POSTAGE

001

☒ Memo Item

Candidate Name

Category/  
Type

Transaction ID : PDTB31EXPB2525

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

Full Name (Last, First, Middle Initial)

**B. ARAXIE ACHADJIAN**

Mailing Address 525 TRAFFIC AVE. #A

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		23		2016

City	State	Zip Code
ARROYO GRANDE	CA	93420

Amount of Each Disbursement this Period

6.13
------

Purpose of Disbursement  
POSTAGE

001

☐ Memo Item

Candidate Name

Category/  
Type

Transaction ID : EXPB2529

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

Full Name (Last, First, Middle Initial)

**C. U. S. POSTAL SVC.**

Mailing Address 160 STATION WAY

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		23		2016

City	State	Zip Code
ARROYO GRANDE	CA	93420

Amount of Each Disbursement this Period

6.13
------

Purpose of Disbursement  
POSTAGE

001

☒ Memo Item

Candidate Name

Category/  
Type

Transaction ID : PDTB33EXPB2529

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

6.13



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 49 OF 89

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**KATCHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. ARAXIE ACHADJIAN**

Mailing Address 525 TRAFFIC AVE. #A

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		23		2016

City	State	Zip Code
ARROYO GRANDE	CA	93420

Amount of Each Disbursement this Period

7.34
------

Purpose of Disbursement  
POSTAGE

001

☐ Memo Item

Candidate Name

Category/  
Type

Transaction ID : EXPB2531

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**B. U. S. POSTAL SVC.**

Mailing Address 160 STATION WAY

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		23		2016

City	State	Zip Code
ARROYO GRANDE	CA	93420

Amount of Each Disbursement this Period

7.34
------

Purpose of Disbursement  
POSTAGE

001

☒ Memo Item

Candidate Name

Category/  
Type

Transaction ID : PDTB34EXPB2531

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**C. ARAXIE ACHADJIAN**

Mailing Address 525 TRAFFIC AVE. #A

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		23		2016

City	State	Zip Code
ARROYO GRANDE	CA	93420

Amount of Each Disbursement this Period

5.92
------

Purpose of Disbursement  
POSTAGE

001

☐ Memo Item

Candidate Name

Category/  
Type

Transaction ID : EXPB2527

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

13.26



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 51 OF 89

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**KATCHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. ARAXIE ACHADJIAN**

Mailing Address 525 TRAFFIC AVE. #A

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		23		2016

City	State	Zip Code
ARROYO GRANDE	CA	93420

Amount of Each Disbursement this Period

162.68
--------

Purpose of Disbursement  
POSTAGE

001

☐ Memo Item

Candidate Name

Category/  
Type

Transaction ID : EXPB2535

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**B. U. S. POSTAL SVC.**

Mailing Address 160 STATION WAY

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		23		2016

City	State	Zip Code
ARROYO GRANDE	CA	93420

Amount of Each Disbursement this Period

162.68
--------

Purpose of Disbursement  
POSTAGE

001

☒ Memo Item

Candidate Name

Category/  
Type

Transaction ID : PDTB28EXPB2535

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**C. ARAXIE ACHADJIAN**

Mailing Address 525 TRAFFIC AVE. #A

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		23		2016

City	State	Zip Code
ARROYO GRANDE	CA	93420

Amount of Each Disbursement this Period

42.98
-------

Purpose of Disbursement  
FOOD FOR VOLUNTEERS

001

☐ Memo Item

Candidate Name

Category/  
Type

Transaction ID : EXPB2533

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

205.66

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 52 OF 89

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**KATCHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. ARAXIE ACHADJIAN**

Mailing Address 525 TRAFFIC AVE. #A

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		23		2016

City	State	Zip Code
ARROYO GRANDE	CA	93420

Amount of Each Disbursement this Period

3.94
------

Purpose of Disbursement  
POSTAGE

001

☐ Memo Item

Candidate Name

Category/  
Type

Transaction ID : EXPB2521

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
State:	District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial)

**B. U. S. POSTAL SVC.**

Mailing Address 160 STATION WAY

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		23		2016

City	State	Zip Code
ARROYO GRANDE	CA	93420

Amount of Each Disbursement this Period

3.94
------

Purpose of Disbursement  
POSTAGE

001

☒ Memo Item

Candidate Name

Category/  
Type

Transaction ID : PDTB30EXPB2521

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
State:	District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial)

**C. CHASE CARD SERVICES**

Mailing Address P. O. BOX 94014

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		23		2016

City	State	Zip Code
PALATINE	IL	60094

Amount of Each Disbursement this Period

894.27
--------

Purpose of Disbursement  
CREDIT CARD PAYMENT

001

☐ Memo Item

Candidate Name

Category/  
Type

Transaction ID : EXPB2512

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
State:	District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

898.21

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 53 OF 89

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**KATCHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. VALENTINO'S TAKE 'N BAKE**

Mailing Address 4421 HOLLISTER AVE.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		23		2016

City	State	Zip Code
SANTA BARBARA	CA	93110

Amount of Each Disbursement this Period

200.00
--------

Purpose of Disbursement  
PIZZA

001

☒ Memo Item

Candidate Name

Category/  
Type

Transaction ID : EDTB43EXPB2512

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**B. U. S. POSTAL SVC.**

Mailing Address 160 STATION WAY

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		23		2016

City	State	Zip Code
ARROYO GRANDE	CA	93420

Amount of Each Disbursement this Period

6.18
------

Purpose of Disbursement  
POSTAGE

001

☒ Memo Item

Candidate Name

Category/  
Type

Transaction ID : EDTB44EXPB2512

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**C. U. S. POSTAL SVC.**

Mailing Address 160 STATION WAY

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		23		2016

City	State	Zip Code
ARROYO GRANDE	CA	93420

Amount of Each Disbursement this Period

102.06
--------

Purpose of Disbursement  
POSTAGE

001

☒ Memo Item

Candidate Name

Category/  
Type

Transaction ID : EDTB45EXPB2512

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00
------

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 54 OF 89

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**KATCHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. COPYRIGHTSB.COM**

Mailing Address 5710 HOLLISTER AVE.

City	State	Zip Code
GOLETA	CA	93117

Purpose of Disbursement  
PRINTING

004

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		23		2016

Amount of Each Disbursement this Period

510.80

☒ Memo Item

Transaction ID : EDTB47EXPB2512

**B. U. S. POSTAL SVC.**

Mailing Address 160 STATION WAY

City	State	Zip Code
ARROYO GRANDE	CA	93420

Purpose of Disbursement  
POSTAGE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		23		2016

Amount of Each Disbursement this Period

5.08

☒ Memo Item

Transaction ID : EDTB46EXPB2512

**C. EFUNDRAISING CONNECTIONS**

Mailing Address 2131 CAPITOL AVE. #306

City	State	Zip Code
Sacramento	CA	95816

Purpose of Disbursement  
MERCHANT FEE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		23		2016

Amount of Each Disbursement this Period

256.52

☐ Memo Item

Transaction ID : EXPB2575

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

256.52

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 55 OF 89

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**KATCHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. KATGOP LLC**

Mailing Address 525 TRAFFIC WAY

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		23		2016

City	State	Zip Code
ARROYO GRANDE	CA	93420

Amount of Each Disbursement this Period

260.00
--------

Purpose of Disbursement  
RENT

001

☐ Memo Item

Candidate Name

Category/  
Type

Transaction ID : EXPB2464

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

Full Name (Last, First, Middle Initial)

**B. MERIDIAN PACIFIC, INC.**

Mailing Address 925 UNIVERSITY AVE.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		23		2016

City	State	Zip Code
SACRAMENTO	CA	95825

Amount of Each Disbursement this Period

10000.00
----------

Purpose of Disbursement  
RADIO ADVERTISING

004

☐ Memo Item

Candidate Name

Category/  
Type

Transaction ID : EXPB2466

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

Full Name (Last, First, Middle Initial)

**C. PEREGRINE MEDIA GROUP**

Mailing Address 1023 NIPOMO ST. #50

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		23		2016

City	State	Zip Code
SAN LUIS OBISPO	CA	93401

Amount of Each Disbursement this Period

4552.50
---------

Purpose of Disbursement  
RADIO AD PRODUCTION

004

☐ Memo Item

Candidate Name

Category/  
Type

Transaction ID : EXPB2462

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

14812.50

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**KATCHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. EFUNDRAISING CONNECTIONS**

Mailing Address 2131 CAPITOL AVE. #306

City	State	Zip Code
Sacramento	CA	95816

Purpose of Disbursement  
MERCHANT FEE

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		24		2016

Amount of Each Disbursement this Period

53.25
-------

☐ Memo Item

Transaction ID : EXPB2631

**B. EFUNDRAISING CONNECTIONS**

Mailing Address 2131 CAPITOL AVE. #306

City	State	Zip Code
Sacramento	CA	95816

Purpose of Disbursement  
MERCHANT FEE

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		25		2016

Amount of Each Disbursement this Period

69.25
-------

☐ Memo Item

Transaction ID : EXPB2632

**C. MERIDIAN PACIFIC, INC.**

Mailing Address 925 UNIVERSITY AVE.

City	State	Zip Code
SACRAMENTO	CA	95825

Purpose of Disbursement  
MEDIA PRODUCTION

004

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		25		2016

Amount of Each Disbursement this Period

225.00
--------

☐ Memo Item

Transaction ID : EXPB2750

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

347.50



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 57 OF 89

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**KATCHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. MERIDIAN PACIFIC, INC.**

Mailing Address 925 UNIVERSITY AVE.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		25		2016

City	State	Zip Code
SACRAMENTO	CA	95825

Amount of Each Disbursement this Period

Purpose of Disbursement  
TV ADVERTISING

004

80000.00

Candidate Name

☐ Memo Item

Transaction ID : EXPB2582

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

**B. EFUNDRAISING CONNECTIONS**

Mailing Address 2131 CAPITOL AVE. #306

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		27		2016

City	State	Zip Code
Sacramento	CA	95816

Amount of Each Disbursement this Period

Purpose of Disbursement  
MERCHANT FEE

001

122.25

Candidate Name

☐ Memo Item

Transaction ID : EXPB2633

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

**C. EFUNDRAISING CONNECTIONS**

Mailing Address 2131 CAPITOL AVE. #306

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		31		2016

City	State	Zip Code
Sacramento	CA	95816

Amount of Each Disbursement this Period

Purpose of Disbursement  
MERCHANT FEE

001

81.52

Candidate Name

☐ Memo Item

Transaction ID : EXPB2730

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

SUBTOTAL of Disbursements This Page (optional).....

80203.77

TOTAL This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 58 OF 89

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**KATCHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Michael McGinnis**

Mailing Address 4575 Camino Molinero

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		31		2016

City	State	Zip Code
Santa Barbara	CA	93110

Amount of Each Disbursement this Period

400.00
--------

Purpose of Disbursement  
SUPPLIESCategory/  
Type☐ Memo Item

Transaction ID : NONB2716

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**B. EFUNDRAISING CONNECTIONS**

Mailing Address 2131 CAPITOL AVE. #306

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		01		2016

City	State	Zip Code
Sacramento	CA	95816

Amount of Each Disbursement this Period

7.00
------

Purpose of Disbursement  
MERCHANT FEE

001

Category/  
Type☐ Memo Item

Transaction ID : EXPB2731

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**C. AT&T**

Mailing Address P. O. BOX 5025

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		02		2016

City	State	Zip Code
CAROL STREAM	IL	60197

Amount of Each Disbursement this Period

110.29
--------

Purpose of Disbursement  
PHONE SVC.

001

Category/  
Type☐ Memo Item

Transaction ID : EXPB2641

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

517.29

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**KATCHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. MERIDIAN PACIFIC, INC.**

Mailing Address 925 UNIVERSITY AVE.

City	State	Zip Code
SACRAMENTO	CA	95825

Purpose of Disbursement  
CAMPAIGN CONSULTING, TRAVEL

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		02		2016

Amount of Each Disbursement this Period

9953.25

☐ Memo Item

Transaction ID : EXPB2643

**B. Nyri Achadjian**

Mailing Address 203 Patricia Court

City	State	Zip Code
San Luis Obispo	CA	93405

Purpose of Disbursement  
ONLINE ADVERTISINGCategory/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		03		2016

Amount of Each Disbursement this Period

971.45

☐ Memo Item

Transaction ID : NONB2842

**C. AT&T**

Mailing Address P. O. BOX 5025

City	State	Zip Code
CAROL STREAM	IL	60197

Purpose of Disbursement  
PHONE SVC.

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		03		2016

Amount of Each Disbursement this Period

40.00

☐ Memo Item

Transaction ID : EXPB2693

**SUBTOTAL** of Disbursements This Page (optional).....

10964.70

**TOTAL** This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 60 OF 89

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**KATCHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. COPYRIGHTSB.COM**

Mailing Address 5710 HOLLISTER AVE.

City	State	Zip Code
GOLETA	CA	93117

Purpose of Disbursement  
PRINTING

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		03		2016

Amount of Each Disbursement this Period

18.20

☐ Memo Item

Transaction ID : EXPB2692

**B. EFUNDRAISING CONNECTIONS**

Mailing Address 2131 CAPITOL AVE. #306

City	State	Zip Code
Sacramento	CA	95816

Purpose of Disbursement  
MERCHANT FEE

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		03		2016

Amount of Each Disbursement this Period

72.50

☐ Memo Item

Transaction ID : EXPB2732

**C. TOM O'MALLEY**

Mailing Address P. O. BOX 808

City	State	Zip Code
ATASCADERO	CA	93423

Purpose of Disbursement  
FUNDRAISING EVENT

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		04		2016

Amount of Each Disbursement this Period

1300.00

☐ Memo Item

Transaction ID : NONB2707

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1390.70

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 61 OF 89

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**KATCHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. EFUNDRAISING CONNECTIONS**

Mailing Address 2131 CAPITOL AVE. #306

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		06		2016

City	State	Zip Code
Sacramento	CA	95816

Amount of Each Disbursement this Period

75.07
-------

Purpose of Disbursement  
MERCHANT FEE

001

Candidate Name

Category/  
Type☐ Memo Item

Transaction ID : EXPB2733

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**B. MELINDA HANSEN**

Mailing Address 3 PASEO LADERA

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		06		2016

City	State	Zip Code
PISMO BEACH	CA	93449

Amount of Each Disbursement this Period

280.50
--------

Purpose of Disbursement  
CAMPAIGN CONSULTING

001

Candidate Name

Category/  
Type☐ Memo Item

Transaction ID : EXPB2714

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**C. AT&T**

Mailing Address P. O. BOX 5025

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		07		2016

City	State	Zip Code
CAROL STREAM	IL	60197

Amount of Each Disbursement this Period

148.28
--------

Purpose of Disbursement  
PHONE SVC.

001

Candidate Name

Category/  
Type☐ Memo Item

Transaction ID : EXPB2729

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

503.85

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 62 OF 89

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**KATCHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. EFUNDRAISING CONNECTIONS**

Mailing Address 2131 CAPITOL AVE. #306

City	State	Zip Code
Sacramento	CA	95816

Purpose of Disbursement  
MERCHANT FEE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		07		2016

Amount of Each Disbursement this Period

28.19
-------

☐ Memo Item

Transaction ID : EXPB2766

**B. MERIDIAN PACIFIC, INC.**

Mailing Address 925 UNIVERSITY AVE.

City	State	Zip Code
SACRAMENTO	CA	95825

Purpose of Disbursement  
CAMPAIGN CONSULTING

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		07		2016

Amount of Each Disbursement this Period

8000.00
---------

☐ Memo Item

Transaction ID : EXPB2728

**C. EFUNDRAISING CONNECTIONS**

Mailing Address 2131 CAPITOL AVE. #306

City	State	Zip Code
Sacramento	CA	95816

Purpose of Disbursement  
MERCHANT FEE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		08		2016

Amount of Each Disbursement this Period

34.50
-------

☐ Memo Item

Transaction ID : EXPB2767

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

8062.69

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 63 OF 89

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**KATCHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. MELINDA HANSEN**

Mailing Address 3 PASEO LADERA

City	State	Zip Code
PISMO BEACH	CA	93449

Purpose of Disbursement  
POSTAGE & SUPPLIES

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		13		2016

Amount of Each Disbursement this Period

85.82
-------

☐ Memo Item

Transaction ID : EXPB2764

**B. U. S. POSTAL SVC.**

Mailing Address 160 STATION WAY

City	State	Zip Code
ARROYO GRANDE	CA	93420

Purpose of Disbursement  
POSTAGE

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		13		2016

Amount of Each Disbursement this Period

4.66
------

☒ Memo Item

Transaction ID : PDTB38EXPB2764

**C. MELINDA HANSEN**

Mailing Address 3 PASEO LADERA

City	State	Zip Code
PISMO BEACH	CA	93449

Purpose of Disbursement  
POSTAGE

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		13		2016

Amount of Each Disbursement this Period

4.87
------

☐ Memo Item

Transaction ID : EXPB2760

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

90.69
-------

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 64 OF 89

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**KATCHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. U. S. POSTAL SVC.**

Mailing Address 160 STATION WAY

City	State	Zip Code
ARROYO GRANDE	CA	93420

Purpose of Disbursement  
POSTAGE

001

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		13		2016

Amount of Each Disbursement this Period

4.87
------

☒ Memo Item

Transaction ID : PDTB36EXPB2760

**B. MELINDA HANSEN**

Mailing Address 3 PASEO LADERA

City	State	Zip Code
PISMO BEACH	CA	93449

Purpose of Disbursement  
POSTAGE & SUPPLIES

001

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		13		2016

Amount of Each Disbursement this Period

13.91
-------

☐ Memo Item

Transaction ID : EXPB2762

**C. U. S. POSTAL SVC.**

Mailing Address 160 STATION WAY

City	State	Zip Code
ARROYO GRANDE	CA	93420

Purpose of Disbursement  
POSTAGE

001

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		13		2016

Amount of Each Disbursement this Period

4.19
------

☒ Memo Item

Transaction ID : PDTB37EXPB2762

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

13.91
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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 65 OF 89

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**KATCHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. MELINDA HANSEN**

Mailing Address 3 PASEO LADERA

City	State	Zip Code
PISMO BEACH	CA	93449

Purpose of Disbursement  
POSTAGE

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		13		2016

Amount of Each Disbursement this Period

3.98
------

☐ Memo Item

Transaction ID : EXPB2758

**B. U. S. POSTAL SVC.**

Mailing Address 160 STATION WAY

City	State	Zip Code
ARROYO GRANDE	CA	93420

Purpose of Disbursement  
POSTAGE

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		13		2016

Amount of Each Disbursement this Period

3.98
------

☒ Memo Item

Transaction ID : PDTB35EXPB2758

**C. IMAGE CUBE**

Mailing Address 7550 SAN FERNANDO RD.

City	State	Zip Code
SU VALLEY	CA	91352

Purpose of Disbursement  
PRINTING

004

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		15		2016

Amount of Each Disbursement this Period

568.85
--------

☐ Memo Item

Transaction ID : EXPB2771

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

572.83

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**KATCHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. PEREGRINE MEDIA GROUP**

Mailing Address 1023 NIPOMO ST. #50

City	State	Zip Code
SAN LUIS OBISPO	CA	93401

Purpose of Disbursement  
VIDEO PRODUCTION

004

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
06 / 15 / 2016

Amount of Each Disbursement this Period

7450.00

☐ Memo Item

Transaction ID : EXPB2772

**B. EFUNDRAISING CONNECTIONS**

Mailing Address 2131 CAPITOL AVE. #306

City	State	Zip Code
Sacramento	CA	95816

Purpose of Disbursement  
MERCHANT FEE

001

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
06 / 16 / 2016

Amount of Each Disbursement this Period

3.75

☐ Memo Item

Transaction ID : EXPB2793

**C. THE SIGN PLACE, SLO**

Mailing Address 812 FIERO LN. #F

City	State	Zip Code
SAN LUIS OBISPO	CA	93401

Purpose of Disbursement  
SIGNS

004

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
06 / 16 / 2016

Amount of Each Disbursement this Period

1006.21

☐ Memo Item

Transaction ID : EXPB2777

**SUBTOTAL** of Disbursements This Page (optional).....

8459.96

**TOTAL** This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 67 OF 89

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**KATCHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. ARAXIE ACHADJIAN**

Mailing Address 525 TRAFFIC AVE. #A

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		20		2016

City	State	Zip Code
ARROYO GRANDE	CA	93420

Amount of Each Disbursement this Period

5.29
------

Purpose of Disbursement  
POSTAGE

001

Candidate Name

Category/  
Type☐ Memo Item

Transaction ID : EXPB2786

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
State:	District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial)

**B. U. S. POSTAL SVC.**

Mailing Address 160 STATION WAY

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		20		2016

City	State	Zip Code
ARROYO GRANDE	CA	93420

Amount of Each Disbursement this Period

5.29
------

Purpose of Disbursement  
POSTAGE

001

Candidate Name

Category/  
Type☒ Memo Item

Transaction ID : PDTB42EXPB2786

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
State:	District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial)

**C. ARAXIE ACHADJIAN**

Mailing Address 525 TRAFFIC AVE. #A

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		20		2016

City	State	Zip Code
ARROYO GRANDE	CA	93420

Amount of Each Disbursement this Period

4.66
------

Purpose of Disbursement  
POSTAGE

001

Candidate Name

Category/  
Type☐ Memo Item

Transaction ID : EXPB2784

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
State:	District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

9.95

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 68 OF 89

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**KATCHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. U. S. POSTAL SVC.**

Mailing Address 160 STATION WAY

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		20		2016

City	State	Zip Code
ARROYO GRANDE	CA	93420

Amount of Each Disbursement this Period

270.92
--------

Purpose of Disbursement  
POSTAGE

001

☒ Memo Item

Candidate Name

Category/  
Type

Transaction ID : PDTB41EXPB2784

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**B. ARAXIE ACHADJIAN**

Mailing Address 525 TRAFFIC AVE. #A

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		20		2016

City	State	Zip Code
ARROYO GRANDE	CA	93420

Amount of Each Disbursement this Period

270.92
--------

Purpose of Disbursement  
SUPPLIES

001

☐ Memo Item

Candidate Name

Category/  
Type

Transaction ID : EXPB2790

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**C. COSTCO**

Mailing Address 1540 FROOM RANCH WAY

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		20		2016

City	State	Zip Code
SAN LUIS OBISPO	CA	93405

Amount of Each Disbursement this Period

270.92
--------

Purpose of Disbursement  
SUPPLIES

001

☒ Memo Item

Candidate Name

Category/  
Type

Transaction ID : PDTB43EXPB2790

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

270.92

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 69 OF 89

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**KATCHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. ARAXIE ACHADJIAN**

Mailing Address 525 TRAFFIC AVE. #A

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		20		2016

City	State	Zip Code
ARROYO GRANDE	CA	93420

Amount of Each Disbursement this Period

45.28
-------

Purpose of Disbursement  
POSTAGE

001

Candidate Name

Category/  
Type☐ Memo Item

Transaction ID : EXPB2788

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**B. COSTCO**

Mailing Address 1540 FROM RANCH WAY

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		20		2016

City	State	Zip Code
SAN LUIS OBISPO	CA	93405

Amount of Each Disbursement this Period

38.33
-------

Purpose of Disbursement  
SUPPLIES

001

Candidate Name

Category/  
Type☒ Memo Item

Transaction ID : PDTB39EXPB2788

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**C. U. S. POSTAL SVC.**

Mailing Address 160 STATION WAY

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		20		2016

City	State	Zip Code
ARROYO GRANDE	CA	93420

Amount of Each Disbursement this Period

6.89
------

Purpose of Disbursement  
POSTAGE

001

Candidate Name

Category/  
Type☒ Memo Item

Transaction ID : PDTB40EXPB2788

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

45.28

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**KATCHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. CHASE CARD SERVICES**

Mailing Address P. O. BOX 94014

City	State	Zip Code
PALATINE	IL	60094

Purpose of Disbursement  
CREDIT CARD PAYMENT

003

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		20		2016

Amount of Each Disbursement this Period

6386.77

☐ Memo Item

Transaction ID : EXPB2792

**B. HAMPTON INN**

Mailing Address 5665 HOLLISTER AVE.

City	State	Zip Code
GOLETA	CA	93117

Purpose of Disbursement  
LODGING

002

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		20		2016

Amount of Each Disbursement this Period

463.30

☒ Memo Item

Transaction ID : EDTB48EXPB2792

**C. VERIZON**

Mailing Address 1215 K ST. #1150

City	State	Zip Code
SACRAMENTO	CA	95814

Purpose of Disbursement  
PHONE SVC.

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		20		2016

Amount of Each Disbursement this Period

130.24

☒ Memo Item

Transaction ID : EDTB49EXPB2792

**SUBTOTAL** of Disbursements This Page (optional).....

6386.77

**TOTAL** This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 71 OF 89

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**KATCHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. U. S. POSTAL SVC.**

Mailing Address 160 STATION WAY

City	State	Zip Code
ARROYO GRANDE	CA	93420

Purpose of Disbursement  
POSTAGE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		20		2016

Amount of Each Disbursement this Period

6.45
------

☒ Memo Item

Transaction ID : EDTB50EXPB2792

**B. LEVON ARAKELYAN**

Mailing Address 1 RADISSON PLAZA #800

City	State	Zip Code
NEW ROCHELLE	NY	10801

Purpose of Disbursement  
WEBSITE DESIGN

004

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		20		2016

Amount of Each Disbursement this Period

1264.00
---------

☒ Memo Item

Transaction ID : EDTB54EXPB2792

**C. U. S. POSTAL SVC.**

Mailing Address 160 STATION WAY

City	State	Zip Code
ARROYO GRANDE	CA	93420

Purpose of Disbursement  
POSTAGE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		20		2016

Amount of Each Disbursement this Period

3.98
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☒ Memo Item

Transaction ID : EDTB51EXPB2792

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00
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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 72 OF 89

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**KATCHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. MONTECITY JOURNAL**

Mailing Address 1206 COAST VILLAGE CIR. #D

City	State	Zip Code
MONTECITY	CA	93150

Purpose of Disbursement  
NEWSPAPER AD

004

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
06 / 20 / 2016

Amount of Each Disbursement this Period

1137.00

☒ Memo Item

Transaction ID : EDTB55EXPB2792

**B. U. S. POSTAL SVC.**

Mailing Address 160 STATION WAY

City	State	Zip Code
ARROYO GRANDE	CA	93420

Purpose of Disbursement  
POSTAGE

001

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
06 / 20 / 2016

Amount of Each Disbursement this Period

3.30

☒ Memo Item

Transaction ID : EDTB52EXPB2792

**C. U. S. POSTAL SVC.**

Mailing Address 160 STATION WAY

City	State	Zip Code
ARROYO GRANDE	CA	93420

Purpose of Disbursement  
POSTAGE

001

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
06 / 20 / 2016

Amount of Each Disbursement this Period

3.98

☒ Memo Item

Transaction ID : EDTB53EXPB2792

**SUBTOTAL** of Disbursements This Page (optional).....

0.00

**TOTAL** This Period (last page this line number only).....



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 73 OF 89

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**KATCHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. GIUSEPPE'S CUCINA ITALIANA**

Mailing Address 891 PRICE ST.

City	State	Zip Code
PISMO BEACH	CA	93448

Purpose of Disbursement  
FUNDRAISING EVENT

002

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		20		2016

Amount of Each Disbursement this Period

2024.98

☒ Memo Item

Transaction ID : EDTB56EXPB2792

**B. COPYRIGHTSB.COM**

Mailing Address 5710 HOLLISTER AVE.

City	State	Zip Code
GOLETA	CA	93117

Purpose of Disbursement  
PRINTING

004

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		20		2016

Amount of Each Disbursement this Period

606.67

☒ Memo Item

Transaction ID : EDTB58EXPB2792

**C. NOOZHAWK**

Mailing Address P. O. BOX 101

City	State	Zip Code
SANTA BARBARA	CA	93102

Purpose of Disbursement  
ONLINE ADVERTISING

004

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		20		2016

Amount of Each Disbursement this Period

632.00

☒ Memo Item

Transaction ID : EDTB57EXPB2792

**SUBTOTAL** of Disbursements This Page (optional).....

0.00

**TOTAL** This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 74 OF 89

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**KATCHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. OFFICEMAX**

Mailing Address 1130 W. BRANCH ST.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		20		2016

City	State	Zip Code
ARROYO GRANDE	CA	93420

Amount of Each Disbursement this Period

63.71
-------

Purpose of Disbursement  
SUPPLIES

001

☒ Memo Item

Candidate Name

Category/  
Type

Transaction ID : EDTB59EXPB2792

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**B. OPEN AIR FLOWERS**

Mailing Address 1050 OSOS

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		20		2016

City	State	Zip Code
SAN LUIS OBISPO	CA	93401

Amount of Each Disbursement this Period

43.20
-------

Purpose of Disbursement  
FLOWERS

001

☒ Memo Item

Candidate Name

Category/  
Type

Transaction ID : EDTB60EXPB2792

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City	State	Zip Code

Amount of Each Disbursement this Period

--

Purpose of Disbursement

Category/  
Type☐ Memo Item

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00

210007.57

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 75 OF 89

<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
------------------------------------	------------------------------------	--	------------------------------------

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NAME OF COMMITTEE (In Full)

**KATCHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. KHATCHIK ACHADJIAN**

Mailing Address 222 GRAND AVE.

City ARROYO GRANDE	State CA	Zip Code 93420
-----------------------	-------------	-------------------

Purpose of Disbursement

Candidate Name

**KHATCHIK ACHADJIAN**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State: CA

District: 24

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y
06 / 23 / 2016

Amount of Each Disbursement this Period

11000.00
----------

☐ Memo Item

Transaction ID : PAYB2796

**B.**

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
---------------------

Amount of Each Disbursement this Period

--

☐ Memo Item**C.**

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
---------------------

Amount of Each Disbursement this Period

--

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

11000.00

11000.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 76 OF 89

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**KATCHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. BROOKS FIRESTONE**

Mailing Address 619 RANCHO ALISAL DR.

City	State	Zip Code
SOLVANG	CA	93463

Purpose of Disbursement  
REFUND

010

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		16		2016

Amount of Each Disbursement this Period

2700.00

☐ Memo Item

Transaction ID : EXPB2776

Full Name (Last, First, Middle Initial)

**B. Charles Ghailian**

Mailing Address 315 E 8th Street

City	State	Zip Code
Los Angeles	CA	90014

Purpose of Disbursement  
REFUND

010

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		16		2016

Amount of Each Disbursement this Period

2300.00

☐ Memo Item

Transaction ID : EXPB2775

Full Name (Last, First, Middle Initial)

**C. DANIEL DAOU**

Mailing Address 1238 OLIVE ST.

City	State	Zip Code
PASO ROBLES	CA	93446

Purpose of Disbursement  
REFUND

010

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		24		2016

Amount of Each Disbursement this Period

2700.00

☐ Memo Item

Transaction ID : EXPB2797

**SUBTOTAL** of Disbursements This Page (optional).....

7700.00

**TOTAL** This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 77 OF 89

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**KATCHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. GEORGES DAOU**

Mailing Address 3300 MIRA LOMA WAY

City	State	Zip Code
PASO ROBLES	CA	93446

Purpose of Disbursement  
REFUND

010

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		24		2016

Amount of Each Disbursement this Period

2700.00

☐ Memo Item

Transaction ID : EXPB2798

**B. LARRY FERNANDEZ**

Mailing Address 380 CRESTMONT DR.

City	State	Zip Code
SAN LUIS OBISPO	CA	93401

Purpose of Disbursement  
REFUND

010

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		24		2016

Amount of Each Disbursement this Period

2700.00

☐ Memo Item

Transaction ID : EXPB2799

**C. KATHLEEN FILIPPONI**

Mailing Address 3120 CALF CANYON HWY

City	State	Zip Code
CRESTON	CA	93432

Purpose of Disbursement  
REFUND

010

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		24		2016

Amount of Each Disbursement this Period

800.00

☐ Memo Item

Transaction ID : EXPB2800

**SUBTOTAL** of Disbursements This Page (optional).....

6200.00

**TOTAL** This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 78 OF 89

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**KATCHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Gary Grossman**

Mailing Address 330 James Way, Ste 270

City	State	Zip Code
Pismo Beach	CA	93449

Purpose of Disbursement  
REFUND

010

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		24		2016

Amount of Each Disbursement this Period

2700.00

☐ Memo Item

Transaction ID : EXPB2801

**B. John Hallvik**

Mailing Address 589 Main Street

City	State	Zip Code
Cambria	CA	93405

Purpose of Disbursement  
REFUND

010

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		24		2016

Amount of Each Disbursement this Period

750.00

☐ Memo Item

Transaction ID : EXPB2802

**C. CHARLES HEBARD**

Mailing Address 2870 HALCYON RD.

City	State	Zip Code
Arroyo Grande	CA	93420

Purpose of Disbursement  
REFUND

010

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		24		2016

Amount of Each Disbursement this Period

300.00

☐ Memo Item

Transaction ID : EXPB2803

**SUBTOTAL** of Disbursements This Page (optional).....

3750.00

**TOTAL** This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 79 OF 89

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**KATCHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. CHRIS HULBURD**

Mailing Address 2171 SHORELINE DR.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		24		2016

City	State	Zip Code
SHELL BEACH	CA	93448

Amount of Each Disbursement this Period

Purpose of Disbursement  
REFUND

010

2700.00

Candidate Name

☐ Memo Item

Transaction ID : EXPB2804

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial)

**B. PAUL JAMUSHIAN**

Mailing Address 4665 N. WEST AVE.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		24		2016

City	State	Zip Code
FRESNO	CA	93705

Amount of Each Disbursement this Period

Purpose of Disbursement  
REFUND

010

450.00

Candidate Name

☐ Memo Item

Transaction ID : EXPB2805

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial)

**C. Armen Kassabian**

Mailing Address 2701 W Alameda Ave Ste 506

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		24		2016

City	State	Zip Code
Burbank	CA	91505

Amount of Each Disbursement this Period

Purpose of Disbursement  
REFUND

010

300.00

Candidate Name

☐ Memo Item

Transaction ID : EXPB2806

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

3450.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**KATCHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. ARMAN KAZARYAN**

Mailing Address 812 PALM DR.

City	State	Zip Code
MONTEBELLO	CA	90640

Purpose of Disbursement  
REFUND

010

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		24		2016

Amount of Each Disbursement this Period

300.00

☐ Memo Item

Transaction ID : EXPB2807

**B. NOREEN MARTIN-HULBURD**

Mailing Address 2171 SHORELINE DR.

City	State	Zip Code
SHELL BEACH	CA	93448

Purpose of Disbursement  
REFUND

010

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		24		2016

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Transaction ID : EXPB2808

**C. CHERYL NADJARIAN**

Mailing Address 3228 BERRY DR.

City	State	Zip Code
STUDIO CITY	CA	91604

Purpose of Disbursement  
REFUND

010

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		24		2016

Amount of Each Disbursement this Period

1400.00

☐ Memo Item

Transaction ID : EXPB2809

**SUBTOTAL** of Disbursements This Page (optional).....

4200.00

**TOTAL** This Period (last page this line number only).....



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 81 OF 89

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**KATCHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. HARRY NADJARIAN**

Mailing Address 3228 BERRY DR.

City	State	Zip Code
STUDIO CITY	CA	91604

Purpose of Disbursement  
REFUND

010

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		24		2016

Amount of Each Disbursement this Period

2700.00

☐ Memo Item

Transaction ID : EXPB2810

**B. NICHOLAS NADJARIAN**

Mailing Address 350 N. GLENOAKS BLVD. #200

City	State	Zip Code
BURBANK	CA	91502

Purpose of Disbursement  
REFUND

010

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		24		2016

Amount of Each Disbursement this Period

2555.15

☐ Memo Item

Transaction ID : EXPB2811

**C. GINGER SANDOVAL**

Mailing Address 3805 LA CUMBRE HILLS LN.

City	State	Zip Code
SANTA BARBARA	CA	93110

Purpose of Disbursement  
REFUND

010

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		24		2016

Amount of Each Disbursement this Period

2300.00

☐ Memo Item

Transaction ID : EXPB2812

**SUBTOTAL** of Disbursements This Page (optional).....

7555.15

**TOTAL** This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 82 OF 89

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**KATCHO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. NICK TOMPKINS**

Mailing Address 684 HIGUERA #B

City	State	Zip Code
SAN LUIS OBISPO	CA	93401

Purpose of Disbursement  
REFUND

010

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		24		2016

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Transaction ID : EXPB2813

**B. CAROL VASSILIADIS**

Mailing Address 4421 YERBA SANTA DR.

City	State	Zip Code
SAN DIEGO	CA	92115

Purpose of Disbursement  
REFUND

010

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		24		2016

Amount of Each Disbursement this Period

2300.00

☐ Memo Item

Transaction ID : EXPB2814

**C. PETER VOSBIKIAN**

Mailing Address 408 POND VIEW DR.

City	State	Zip Code
MOORESTOWN	NJ	08057

Purpose of Disbursement  
REFUND

010

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		24		2016

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Transaction ID : EXPB2815

**SUBTOTAL** of Disbursements This Page (optional).....

4300.00

**TOTAL** This Period (last page this line number only).....

37155.15

**SCHEDULE C (FEC Form 3)**  
**LOANS**

PAGE 83 OF 89

Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☐ 13a  
☒ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : PAYC159

KATCHO FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

☐ Memo Item

KHATCHIK ACHADJIAN

Election: 2016

☒ Primary☐ General☐ Other (specify) ▼Mailing Address  
222 GRAND AVE.

City

State

ZIP Code

ARROYO GRANDE

CA

93420

Original Amount of Loan

30000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

30000.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
06 / 30 / 2015

Date Due

M M / D D / Y Y Y Y  
06/30/2015

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

30000.00

**TOTALS** This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

: 97 `A=G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @G `CF`+H9A=N5HCB  
.

Form/Schedule: SC/10

Transaction ID : PAYC159

LOAN OF PERSONAL FUNDS

Form/Schedule:

Transaction ID:

**SCHEDULE C (FEC Form 3)**  
**LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 85 OF 89

FOR LINE NUMBER:  
(check only one)☐ 13a  
☒ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : PAYC2747

KATCHO FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

☐ Memo Item

KHATCHIK ACHADJIAN

Election: 2016

☒ Primary☐ General☐ Other (specify) ▼Mailing Address  
222 GRAND AVE.

City

State

ZIP Code

ARROYO GRANDE

CA

93420

Original Amount of Loan

11000.00

Cumulative Payment To Date

11000.00

Balance Outstanding at Close of This Period

0.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
06 / 10 / 2016

Date Due

M M / D D / Y Y Y Y  
None

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

0.00

**TOTALS** This Period (last page in this line only)..... ►

30000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 86 OF 89

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**KATCHO FOR CONGRESS**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**ARAXIE ACHADJIAN**

Nature of Debt (Purpose):

**FOOD FOR VOLUNTEERS**

Mailing Address 525 TRAFFIC AVE. #A

City State

ARROYO GRANDE

Zip Code

CA

93420

Outstanding Balance Beginning This Period

42.98

**Transaction ID : PAYD2513**

Amount Incurred This Period

0.00

Payment This Period

42.98

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**ARAXIE ACHADJIAN**

Nature of Debt (Purpose):

**POSTAGE**

Mailing Address 525 TRAFFIC AVE. #A

City State

ARROYO GRANDE

Zip Code

CA

93420

Outstanding Balance Beginning This Period

162.68

**Transaction ID : PAYD2514**

Amount Incurred This Period

0.00

Payment This Period

162.68

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**ARAXIE ACHADJIAN**

Nature of Debt (Purpose):

**POSTAGE**

Mailing Address 525 TRAFFIC AVE. #A

City State

ARROYO GRANDE

Zip Code

CA

93420

Outstanding Balance Beginning This Period

3.98

**Transaction ID : PAYD2515**

Amount Incurred This Period

0.00

Payment This Period

3.98

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional) ..... ▶2) **TOTALS** This Period (last page this line number only) ..... ▶3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

0.00

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 87 OF 89

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**KATCHO FOR CONGRESS**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**ARAXIE ACHADJIAN**Nature of Debt (Purpose):  
POSTAGE

Mailing Address 525 TRAFFIC AVE. #A

City State

Zip Code

ARROYO GRANDE

CA

93420

Outstanding Balance Beginning This Period

3.94

Transaction ID : PAYD2516

Amount Incurred This Period

0.00

Payment This Period

3.94

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**ARAXIE ACHADJIAN**Nature of Debt (Purpose):  
POSTAGE

Mailing Address 525 TRAFFIC AVE. #A

City State

Zip Code

ARROYO GRANDE

CA

93420

Outstanding Balance Beginning This Period

5.50

Transaction ID : PAYD2517

Amount Incurred This Period

0.00

Payment This Period

5.50

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**ARAXIE ACHADJIAN**Nature of Debt (Purpose):  
POSTAGE

Mailing Address 525 TRAFFIC AVE. #A

City State

Zip Code

ARROYO GRANDE

CA

93420

Outstanding Balance Beginning This Period

5.92

Transaction ID : PAYD2518

Amount Incurred This Period

0.00

Payment This Period

5.92

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional) ..... ▶2) **TOTALS** This Period (last page this line number only) ..... ▶3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

0.00

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 88 OF 89

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**KATCHO FOR CONGRESS**A. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**ARAXIE ACHADJIAN**Nature of Debt (Purpose):  
**POSTAGE**

Mailing Address 525 TRAFFIC AVE. #A

City State Zip Code  
ARROYO GRANDE CA 93420

Outstanding Balance Beginning This Period

6.13

**Transaction ID : PAYD2519**

Amount Incurred This Period

0.00

Payment This Period

6.13

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**ARAXIE ACHADJIAN**Nature of Debt (Purpose):  
**POSTAGE**

Mailing Address 525 TRAFFIC AVE. #A

City State Zip Code  
ARROYO GRANDE CA 93420

Outstanding Balance Beginning This Period

7.34

**Transaction ID : PAYD2520**

Amount Incurred This Period

0.00

Payment This Period

7.34

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**KATGOP LLC**Nature of Debt (Purpose):  
**RENT**

Mailing Address 525 TRAFFIC WAY

City State Zip Code  
ARROYO GRANDE CA 93420

Outstanding Balance Beginning This Period

260.00

**Transaction ID : PAYD2463**

Amount Incurred This Period

0.00

Payment This Period

260.00

Outstanding Balance at Close of This Period

0.00

- 1) **SUBTOTALS** This Period This Page (optional) ..... ▶
- 2) **TOTALS** This Period (last page this line number only) ..... ▶
- 3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶
- 4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

0.00



**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 89 OF 89

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**KATCHO FOR CONGRESS**A. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**ROBERT MERCADO**Nature of Debt (Purpose):  
**CANVASSING**

Mailing Address 1215 CACIQUE ST. #D

City State Zip Code  
SANTA BARBARA CA 93103

Outstanding Balance Beginning This Period

196.00

**Transaction ID : PAYD2430**

Amount Incurred This Period

0.00

Payment This Period

196.00

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**MERIDIAN PACIFIC, INC.**Nature of Debt (Purpose):  
**CAMPAIGN CONSULTING, TRAVEL**

Mailing Address 925 UNIVERSITY AVE.

City State Zip Code  
SACRAMENTO CA 95825

Outstanding Balance Beginning This Period

9953.25

**Transaction ID : PAYD2642**

Amount Incurred This Period

0.00

Payment This Period

9953.25

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional) ..... ▶

0.00

2) **TOTALS** This Period (last page this line number only) ..... ▶

0.00

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶